

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Type:: REGULAR  
Subject Matter:: UTILITY  
CD-ROM or CD-R?: NONE  
Title:: AGENTS FOR ALLEVIATING  
SYMPTOMS ACCOMPANIED BY  
INFLAMMATION  
Attorney Docket Number:: 219451US0  
Total Drawing Sheets:: 7

### INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Masako  
Family Name:: YAJIMA  
City of Residence:: Tokyo  
Country of Residence:: JAPAN  
Street of Mailing Address:: 3-2-22, Saiwai-cho  
City of Mailing Address:: Higashikurume-shi  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: JAPAN

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Makiko  
Family Name:: NAKAYAMA  
City of Residence:: Ibaraki-Ken  
Country of Residence:: JAPAN  
Street of Mailing Address:: 803-601, 1-13-2, Takezono  
City of Mailing Address:: Tsukuba-shi  
State or Province of Mailing Address:: Ibaraki-ken  
Country of Mailing Address:: JAPAN

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Yumi
Family Name::	TSUKAMOTO
City of Residence::	Tokyo
Country of Residence::	JAPAN
Street of Mailing Address::	Birreji-Kagayaki 303, 1-15-5,
	Gakuenhigashi-cho
City of Mailing Address::	Kodaira-shi
State or Province of Mailing Address::	Tokyo
Country of Mailing Address::	JAPAN
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Kaoru
Family Name::	KOIDE
City of Residence::	Tokyo
Country of Residence::	JAPAN
Street of Mailing Address::	12-4, Tateno-cho, Nerima-ku
City of Mailing Address::	Tokyo
Country of Mailing Address::	JAPAN
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	JAPAN
Status::	FULL CAPACITY
Given Name::	Tamotsu
Family Name::	KUWATA
City of Residence::	Saitama-ken
Country of Residence::	JAPAN
Street of Mailing Address::	963-9, Yamaguchi
City of Mailing Address::	Tokorozawa-shi
State or Province of Mailing Address::	Saitama-ken
Country of Mailing Address::	JAPAN

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Takaji  
Family Name:: YAJIMA  
City of Residence:: Tokyo  
Country of Residence:: JAPAN  
Street of Mailing Address:: 3-2-22, Saiwai-cho  
City of Mailing Address:: Higashikurume-shi  
State or Province of Mailing Address:: Tokyo  
Country of Mailing Address:: JAPAN

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
2001-038486	Japan	02/15/01	YES

#### ASSIGNMENT INFORMATION

Assignee Name:: MEIJI DAIRIES CORPORATION  
Street of Mailing Address:: 2-10, Shinsuna 1-chome, Koto-Ku  
City of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan